

Qty Purchase Agreement QPA Number	Page
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Requisition Nbr.:	Lab Supplies, Forensic
Effective Date:	08/14/2013
Expiration Date:	07/31/2015
Agency Number:	
Facility:	ASA-13-077
Vendor ID:	0000257932
Vendor Telephone Nbr:	910-457-6600
Name Of Contact Pers:	ERIC BARTON
Contact Email:	ebarton@tritechusa.com
FAX Number:	910-457-0094

Name and Address of Vendor: TRI-TECH FORENSICS INC
4019 EXECUTIVE PARK BLVD SE
SOUTHPORT NC 28461

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement.

Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number	Quantity	UNIT	Article and Description	Unit Price
<p>This is an award of a Quantity Purchase Agreement for Laboratory and Forensic Supplies.</p> <p>QPA can be mutually renewed yearly for three additional years.</p> <p>The vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration date, but issued prior to the expiration date, and postmarked no later than 14 business days after the QPA's expiration date.</p> <p>Quantities were estimates and actual usage could be substantially more or less.</p> <p>The awarded vendor must maintain, at a minimum the information listed below in excel format and supplied to the State within one week of the request.</p> <p>The report must include purchases from State Agencies and any Political Subdivision's purchases.</p> <p>* Entity Name * Entity Address * Date of Order * Purchase Order Number * Description of Goods Ordered * Quantity * Order Total</p> <p>Delivery will be 30 days after receipt of order or as agreed upon by the Requesting Agency and Vendor at time order is placed.</p>				
1	99,999,999.00	BX	000000000100078542 Kit, NARK Barbituis (Dille-Koppaynyl),10 tests/Box,TTF #ODV-905	12.0000
2	99,999,999.00	EA	000000000100078550 Tape,Crime Scene Roll,3"x1000',TTF # BT-CS	8.5000
3	99,999,999.00	EA	000000000100078555 Tape, Evidence, Red, 1.5"x54', TTF# ST-E/54 (R)	4.9000
4	99,999,999.00	EA	000000000100078557 Brush, Fingerprint Powder, TTF# BR-C-1.5(6)	2.6000
5	99,999,999.00	PK	000000000100078565 Container, Arson Collection, 1 GAL, TTF# CAN 1 GAL	49.9500
6	99,999,999.00	PK	000000000100078571 Ties, Resealable Evidence, TTF# TIES-11NR	8.7500
7	99,999,999.00	EA	000000000100078572 Kit,Sexual Assault,Victim,per revised specifications of July 2014,TTF #RE-2IN	15.9200
8	99,999,999.00	EA	000000000100078586 Developer,Fingerprint,Cyanocrylate,16 oz,TTF #LC-CYAN-16	31.0000
9	99,999,999.00	PK	000000000100078596 Lifter,Footprint Gel,1BK and 1WH,6"x15",TTF # LFT-RWB-7X14	10.7500
10	99,999,999.00	EA	000000000100078613 Casting,Blue 8.8 Impression Compound,TTF #CMD-9	12.0000
11	99,999,999.00	PK	000000000100078618 Lifter,Fingerprint Hinge 2"x4",TTF #LFT-W-2X4,12PKG	3.9900
12	99,999,999.00	PK	000000000100078620 Lifter,Fingerprint Gel 2"x2".WH.TTF #LFT-W-2X2,12PKG	5.8100

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Line Number	Quantity	UNIT	Article and Description	Unit Price
13	99,999,999.00	PK	000000000100078627 Swabs, Sterile Cotton Applicator, TTF #SWAB-COT6W2,100/PKG	5.7500
14	99,999,999.00	PK	000000000100078628 Box, Cotton Swab Applicator, TTF #SWABBOXNPW6,100/PKG	11.5000
15	99,999,999.00	EA	000000000100078630 Tape,Evidence,1.5"x108',TTF #ST-E	7.4000
16	99,999,999.00	EA	000000000100078632 Coveralls, Personal Protection, XL, TTF# CVRALL-XL	3.7000
17	99,999,999.00	KT	000000000100166121 Blood/Urine Specimen Collection Kit TTF #BU-3IN as described in further detail below and to include the various tubes, bottles, bags, etc.	4.4900

NOTE:

- A) Expiration date must be a minimum of 18 months at time of delivery.
- B) Product Label on each shipping container must include Purchase Order Number, Lot Number, and Expiration Date.
- C) Price is based on ordering 6,000 kits, shipping and Invoicing for 500 kits every month for 12 months.
- D) Barcode type must be CODE 39

State Form 9955(R10/7-08)-Electronic Version-Approved by State Board Of Accounts. 2008

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Line Number	Quantity	UNIT	Article and Description	Unit Price
		EA	Each	
		KT	Kit	
		PK	Package	

Signature of Purchasing Officer	Typed Name	Signature Of Approval Office Of the State Attorney General	
	Date Signed	Typed Name	Date Signed
Authorized Signature	Indiana Department Of Administration Procurement Division 402 West Washington Street, Rm W468 Indianapolis, Indiana 46204 Telephone: (317) 232-3150		